FORM D

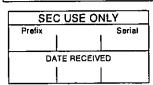
UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1444	578
OMB APPR	ROVAL
OMB Number:	3235-0076
Expires:	1
Estimated average	ge burden

hours per response. 16.00



Name of Offering (check if this is an amendment and name has changed, and indicate of	hange.)		SEC
North Coast Long/Short Equities LLC		0.0-	all Processing
	Section 4(6)	☐ nroe	Section
Type of Filing:			- 0000
A. BASIC IDENTIFICATION DA	ATA		EP 022008
1. Enter the information requested about the issuer		244	
Name of Issuer (check if this is an amendment and name has changed, and indicate chark North Coast Long/Short Equities LLC	ngc.)	ชชุ	ashington, 00
Address of Executive Offices (Number and Street, City, State,	• •	•	ber (Including Area Code)
35 Mason Street Greenwich, CT 06830		203-629-8705	
Address of Principal Business Operations (Number and Street, City, State (if different from Executive Offices)	, Zip Code)	Telephone Nun	nber (Including Area Code)
Brief Description of Business			
		•	PROCESSED
Type of Business Organization corporation limited partnership, already formed	other (p	lease specify):	SEP 0 8 2008
business trust limited partnership, to be formed	limited liab	ility company	OMSON REUTERS
Month Year			OMOON KEUIEKS
Actual or Estimated Date of Incorporation or Organization: 06 03 Actual			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviat			
CN for Canada; FN for other foreign jurisdic	<i>.</i>	DE	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA							
Enter the information r	equested for the fo	llowing:								
· •			within the past five years;							
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issued										
 Each executive of 	ficer and director o	f corporate issuers and of	f corporate general and mar	naging partners of	partnership issuers; and					
 Each general and 	managing partner o	of partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first,	if individual)			 	· · · · · · · · · · · · · · · · · · ·					
NorthCoast Asset Mana										
Business or Residence Addr			Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, Dean, Paul E.	if individual)									
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)							
5 Mason Street Gree	nwich, CT 0683	0								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Z Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, Semels, James Richard										
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)							
35 Mason Street Gree	nwich, CT 0683	0								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, Kraninger, Daniel J.	if individual)									
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)							
35 Mason Street Gree	enwich, CT 068	30								
Check Box(es) that Apply:	Promoter	✓ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, Elam, Brentin C.	if individual)									
Business or Residence Addr 35 Mason Street Gree	ess (Number and enwich, CT 0683		Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, Wildern, John M.	if individual)		 -							
Business or Residence Addr 35 Mason Street Gree	ess (Number and enwich, CT 0683		Code)	·						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first,	if individual)									
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)							
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary))					

Form D North Coast Long/Short Equities LLC Additional information re B(4)

Elam, Brentin C. 35 Mason Street Greenwich, CT 06830 States - CA, CT, NY, NJ, TX

Wildern, John M. 35 Mason Street Greenwich, CT 06830 States – CA, CT NY, NJ, TX

	. <u>.</u>				B. If	NFORMATI	ON ABOU	T OFFERI	NG				
1 II de l'annual des the issues intend to sell to non occaredited invectors in this offering?								Yes	No ⊠				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							_	<u> </u>					
2. What is the minimum investment that will be accepted from any individual?								\$_500	0,000.00				
	2. What is the infilling investment that will be accepted from any marriadar.									Yes	No		
3.			permit joint									R	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only.								he offering. with a state					
	l Name (an, Paul		first, if indi	vidual)									
	·		Address (N	umber and	l Street, C	ity, State, Z	(ip Code)		·	<u> </u>			
	Mason S		eenwich, C			<u>.</u>	·	 .			_		
Na	me of As	sociated Br	oker or Dea	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		 -				
			s" or check									All States	
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY VJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
		Last name	first, if indi	vidual)									
Bu	siness or	Residence	: Address (N Greenwich,			City, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler						-		_	
Sta			Listed Has						·				-
(Check "All States" or check individual States)								••••••	☐ AI	I States			
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	GA KY NJ TX	CO LA NM UT	ME ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
	II Name (ninger, D		first, if indi	ividual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
35 Mason Street Greenwich, CT 06830 Name of Associated Broker or Dealer													
Name of Associated Broker of Beater													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							*******	☐ A1	I States				
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	G/A KY MJ T/X	CO LA NM UT	ME ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u>. </u>	\$
	Equity	<u> </u>	\$
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests		\$
	Other (Specifymembership interests		
	Total	49,500,000.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$ 6,368,300.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		s <u>0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 3,000.00
	Legal Fees	[]	\$_10,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		\$ 13,000.00

b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross" proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Payments to Affiliates Others Salaries and fees Purchase, rental or leasing and installation of machinery Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) _______ \$_____ Working capital _______ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ Other (specify): Investment in US Securities _____\$<u>48,992,130.</u>(__\$___ \$ ____ \$ **Z** \$_49,487,000.00 Total Payments Listed (column totals added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signaturo August 29,2008 North Coast Long/Short Equities LLC Name of Signer (Print or Type) Title of Signer (Print or Type) James Richard Semels Chief Executive Officer of Managing Member

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)